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 415-383-8341

## Address to:

Box Patent Application  
 Commissioner for Patents  
 Washington, D.C. 20231

Attorney's Docket No. SONY-T1026First Named Inventor MUNETOSHI MORIUCHI

**UTILITY PATENT APPLICATION TRANSMITTAL**  
 ( under 37 CFR 1.53(b) )

SIR:

Transmitted herewith for filing is the patent application entitled:  
**WRITING DEVICE**

**CERTIFICATION UNDER 37 CFR § 1.10**

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date JANUARY 17, 2001, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number E916798652US addressed to: Box Patent Application, Commissioner for Patents, Washington, D.C. 20231.

CHARLES P. SAMMUT  
 (Name of person mailing paper)

(Signature)

Enclosed are:

1.  Transmittal Form (two copies required)
2. The papers required for filing date under CFR § 1.53(b):
  - i. 57 Pages of specification (including claims and abstract);
  - ii. 15 Sheets of drawings.  
 \_\_\_\_\_ formal       informal
3. Declaration or oath
  - a.  Unsigned - Combined with Power of Attorney

**ACCOMPANYING APPLICATION PARTS**

4.  An assignment of the invention to \_\_\_\_\_ is attached (including Form PTO-1595).
  - i.  37 CFR 3.73(b) Statement (when there is an assignee)
5.  Power of Attorney - Unsigned - Combined with Declaration
6.  An Information Disclosure Statement (IDS) is enclosed, including a PTO-1449 and copies of \_\_\_\_\_ references.
7.  Preliminary Amendment.
8.  Return Receipt Postcard (MPEP 503 -- should be specifically itemized)
9.  Other
10. FOREIGN PRIORITY
 

Priority of application no. P2000-017889 filed on January 24, 2000 in Japan is claimed under 35 USC 119.

The certified copy of the priority application:

- is filed herewith; or
- has been filed in prior application no. \_\_\_\_\_ filed on \_\_\_\_\_, or
- will be provided.

English Translation Document (if applicable)

**11. FEE CALCULATION**

- a.  Amendment changing number of claims or deleting multiple dependencies is enclosed.

**CLAIMS AS FILED**

	Number Filed	Number Extra	Rate	Basic Fee (\$710)
Total Claims	9 - 20	0	x \$18.00	0
Independent Claims	2 - 3	0	x \$80.00	0
<input type="checkbox"/> Multiple dependent claim(s), if any			\$270.00	0

\*If less than zero, enter "0".

Filing Fee Calculation ..... \$710.00

50% Filing Fee Reduction (if applicable) ..... \$

**12. Small Entity Status**

- a.  A small entity statement is enclosed.  
b.  A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.  
c.  is no longer claimed.

**13. Other Fees**

Recording Assignment (\$40.00) ..... \$  
 Other fees ..... \$  
 Specify \_\_\_\_\_

Total Fees Enclosed ..... \$

**14. Payment of Fees**

Check(s) in the amount of \$\_\_\_\_ enclosed.

**15. All correspondence regarding this application should be forwarded to the undersigned attorney:**

Charles P. Sammut  
Attorney at Law  
350 Woodside Avenue  
Mill Valley, CA 94941-3822  
Telephone: 415-383-8341  
Facsimile: 415-388 7539

JANUARY 17, 2001

(Date)

Attorney Docket No. SONY-T1026  
(S01P0026US00)

By: \_\_\_\_\_

Charles P. Sammut  
Registration No. 28,901  
Attorney for Applicant